

This checklist is intended solely to assist inspectors in structuring an inspection and to help them ensure that common regulatory issues are not overlooked. It is not necessarily intended to represent an accurate record of the inspector's findings or observations. Notations and other comments on the checklist are not always to be viewed as direct observations by the inspector or actual fact, but may instead reflect claims by facility personnel or tentative responses which require further investigation for confirmation.

U.S. Environmental Protection Agency
Region III
Multi-Media Screening Checklist

<u>Program</u>	<u>Check if Evaluated</u>	<u>Check if Facility is Subject to Program</u>
Resource Conservation and Recovery Act (RCRA)	_____	_____
Underground Storage Tanks	_____	_____
Wetlands	_____	_____
Spill Prevention, Containment and Countermeasure (SPCC)	_____	_____
Federal Insecticide, Fungicide and Rodenticide Act (FIFRA)	_____	_____
Air	_____	_____
Toxic Substances Control Act (TSCA) - PCB	_____	_____
TSCA - Core	_____	_____
Water	_____	_____
Emergency Planning and Community Right-to-Know Act (EPCRA) (SARA - Title III)	_____	_____

General Information

FACILITY NAME Super Salvage

ADDRESS _____
(Street) (City) (State) (Zip)

CONTACT _____

PHONE NUMBER (202) 488 7157 (SIC CODE) _____

DESCRIPTION OF FACILITY OPERATIONS _____

NUMBER OF EMPLOYEES ~ 28

LATITUDE _____ LONGITUDE _____

INSPECTORS NAME _____

SIGNATURE _____

TITLE _____

DATE _____

NOTES: This checklist is single sided to allow space on reverse side to record additional information.

It is probably most efficient to combine, to the extent possible, the observational needs required for this checklist with those of the media specific inspection during one general tour of the facility. It may behoove the inspector to complete this checklist before making any tour of the facility so that he/she can better identify what needs to be looked at.

RESOURCE CONSERVATION AND RECOVERY ACT (RCRA) - HAZARDOUS WASTE

Regional Contact: Carol Amend Phone: 814-5430

1. Ask - Does the facility have an EPA RCRA ID Number?
_____ Yes _____ No If yes, provide _____
2. Ask - Has the facility submitted a Part A or Part B RCRA permit application? _____ Yes _____ No
If yes, describe _____
3. Ask - What are the hazardous wastes that the facility is generating?

4. Ask - What is the total quantity (kilograms/month) of hazardous waste generated?

5. Ask - Has the facility classified its waste as hazardous based on test results or knowledge of process?

6. Ask - Are hazardous wastes accepted from other facilities for storage, treatment, or disposal? If yes, list those facilities.

7. Observe - Are there any tanks or drums containing waste material? If yes, describe (i.e., physical condition, labels/markings, secondary containment, spills/ leaks, open containers and approximate numbers). Indicate how long the waste has been stored in tanks or containers?

8. **Observe** - Have any waste materials been dumped into pits, lagoons, etc. or placed on the ground in piles or landfills? If yes, list the waste material, approximate quantities and when and where it was dumped.

9. **Observe** - Are any waste materials being burned for energy recovery? If yes, describe the units in which burning occurs.

10. **Ask** - To see copies of manifests for the last year. Take a copy of a representative manifest for each type of waste. Don't worry about what it says, just copy it and all the attachments.

UNDERGROUND STORAGE TANKS (USTs)

REGIONAL CONTACT: Carol Amend Phone: 814-5430

1. Ask - Are there any underground storage tanks?
_____ Yes ☒ No
2. Ask - Approximately how many? What are the contents?
(wastes, virgin petroleum, or chemicals)
had one tank which was removed from
in the 70s.
3. Ask/Observe - What type of leak (release) detection is used
(see next page for possible methods)? Does the facility have
records showing that the method is, in fact, still in use?

Tanks: _____
Piping: _____
4. Ask/Observe - Have tanks been upgraded for spill and overfill
protection and are steel tanks provided with cathodic
protection against corrosion? _____ Yes _____ No
5. Observe - Is there any evidence of leaks, spills, broken
piping, broken fill/vent lines, or leaking pumps joints or
valves? Provide location and description.

6. Ask - Have the USTs been registered with the appropriate State
agency? _____ Yes _____ No If so, request a copy of the
registration form.

UST CLOSURE

Closure of USTs must be performed according to regulation. If USTs are being closed, a notification of closure should be filed with the appropriate State agency 30 days prior to actual closure. Also, a site assessment should be performed.

1. Ask/Observe - Have any tanks been permanently closed/removed
since registration form was submitted? _____ Yes _____ No

-If so, was notification of closure submitted to State?

_____ Yes _____ No

* Methods of Release Detection for USTs:

WETLANDS

REGIONAL CONTACT: Jeffery Lapp
Phone Number: 814-2717

1. Observe - Are there any wet areas near the facility with wetland-type vegetation (cattails, rushes, sedges) that have been disturbed by waste disposal, excavation, or filling?
-
-

- if yes - did facility obtain a federal Section 404 permit or any state or local permit authorizing the alteration?

SPILL PREVENTION, CONTAINMENT AND COUNTERMEASURE (SPCC)

REGIONAL CONTACT: David Wright

Telephone Number: 814-3293

1. Ask/Observe - Does the facility store oil above and/or below ground? ☒ Yes ☐ No

2. Ask/Observe - Does the facility store more than 660 gallons in a single tank or more than 1320 gallons in a number of tanks above ground or more than 42,000 gallons below ground?
☐ Yes ☐ No

If yes, describe:

*2 diesel fuel 500 gallons each
2 used oil tank 350 gal. each
2 12-15 55 gal. dr. oil
hydraulic unit 2 600 gal.
" " 2 350 gal.*

3. Ask/Observe - Does the facility have an SPCC (Spill prevention, Containment and Countermeasure) plan on hand?
☐ Yes ☒ No

4. Ask/Observe - Does the facility have a certified (engineers seal affixed) plan? ☐ Yes ☐ No

If yes, was it signed by a registered professional engineer?
☐ Yes ☐ No

When was it last updated? _____

5. Ask - Has there been any major changes to oil storage at the facility since the last modification of the plan?
☐ Yes ☐ No

If yes, describe:

6. Observe - What type of secondary containment is used at the facility? Were there any deficiencies in the secondary containment (cracks, breaks, dikes left open)? Is it adequate to contain the entire contents of the largest tank?

*diesel fuel tank - double walled.
No other secondary cont.
concrete containment for used oil
is broken out*

7. **Ask** - Has the facility been identified, either through a self-selection process or by determination of the Regional Administrator, as one that could cause substantial harm to the environment ? ☐ Yes ☐ No

Some criteria that apply are total storage capacity $\geq 42,000$ gal. and performs overwater oil transfers to or from vessels OR total storage capacity $\geq 1,000,000$ gal and one of the following: (1) inadequate secondary containment for ASTs, (2) reportable spills $\geq 10,000$ gal within the past 5 years, (3) located in an environmentally sensitive area, or (4) one where a discharge would shut down a public drinking water intake.

If yes, answer the following:

- Was a facility response plan prepared?
☐ Yes ☐ No
- Was the plan approved by EPA? ☐ Yes ☐ No

FEDERAL INSECTICIDE, FUNGICIDE, AND RODENTICIDE ACT (FIFRA)

REGIONAL CONTACT: Harry Daw

TELEPHONE: 814-3244

1. Ask/Observe - Does the facility manufacture or distribute any pesticides? ☐ Yes ☐ No

2. Ask - If yes, what is the establishment's EPA FIFRA registration number?

3. Ask/Observe - Where are these materials stored?

4. Ask/Observe - Does the facility apply pesticides?
 ☐ Yes ☒ No

5. Ask - If yes, what is the registration number of the pesticide?

AIR: STATIONARY SOURCE COMPLIANCE

AIR CONTACT: Chris Pilla
814-3438

1. Observe - Is opaque smoke being emitted from a smokestack (dark enough not to observe anything behind the plume)?

_____ Yes _____ No

- If yes - which process unit(s) is emitting the opaque smoke (be specific, i.e., Boiler No. 4, incinerator, etc.)?
- _____
- _____

2. Observe - Describe areas where fugitive emissions (both gaseous and visible) are likely to occur (includes emissions from treatment systems, open top tanks, valves, flanges, etc.)
- _____
- _____

3. Ask/Observe - Do any of the process units have any air pollution control equipment to control emissions?

_____ Yes _____ No

If yes, describe process/equipment:

- Is any air pollution control equipment out of service?

_____ Yes _____ No

- If yes, when will it be back on line?
- _____

4. Ask/Observe - Does the facility have any coating* operations?

_____ Yes _____ No

- If yes, obtain list of coatings and lb/gal VOC content. Are these water-based or solvent based coatings?
- _____

- Are emissions from coating process lines controlled?

_____ Yes _____ No

If yes, describe control devices:

5. **Ask/Observe** - Has the facility added any processes or expanded any pre-existing processes since 1980? _____ Yes _____ No

- If yes, describe any state or federal air permits obtained (operating; PSD**)?

6. **Ask/Observe** - Is there any asbestos on site?

_____ Yes _____ No

7. **Ask/Observe** - Is the facility undergoing or has the facility undergone any renovations or demolitions during the last 18 months which involve the removal or disturbance of asbestos-containing materials? _____ Yes _____ No
- think there might be asbestos in old insulation*

If yes, describe how much asbestos (square feet or linear feet) was removed, where it was located and other details:

8. **Ask** - If asbestos was removed was notification provided to the State and EPA? _____ Yes _____ No

* Refers strictly to paints, lacquers, varnishes and inks and not to electroplating/metal finishing processes.

** Prevention of Significant Deterioration

9. **Ask/Observe** - Does the facility handle/emit any of the National Emission Standards for Hazardous Air Pollutants (NESHAP) chemicals other than asbestos (mercury, beryllium, vinyl chloride, benzene, arsenic, radionuclides)?
- _____ Yes _____ No

If yes, describe process:

-
-
-
10. **Ask/Observe** - Does the facility perform any service/maintenance on any type of refrigeration equipment involving a refrigerant? ☐ Yes ☐ No

If yes, answer the following:

- Does the facility have an EPA certified technician?
☐ Yes ☐ No
(If yes, get a copy of the certification card/certificate)
- Does the facility own and operate refrigerant recovery equipment? ☐ Yes ☐ No
(If yes, get the model and serial number of the equipment)
- Does the facility have a file copy of its equipment registration that was sent to EPA? ☐ Yes ☐ No
- Does the facility have any refrigeration units with refrigerant charges of 50 lbs or greater?
☐ Yes ☐ No
- What have been the leak rates on these larger units for the last three years? _____
- Does the facility keep all maintenance records for all units of 50 lbs or greater? ☐ Yes ☐ No
- Are leaks above the allowable leak rate (35%/ year) repaired within 30 days, or 120 days if an industrial process shut down is required? ☐ Yes ☐ No
- If the leaks have been repaired, was a follow-up verification test conducted before the refrigerant was recharged into the system? ☐ Yes ☐ No
- If no repairs were conducted or repairs failed, was a retrofit or retirement plan prepared and available for review? ☐ Yes ☐ No

11. **Ask/Observe** - Does the facility own and operate a dry clean machine? ☐ Yes ☐ No

If yes, answer the following:

- Did this facility file an initial notification with EPA?
_____ Yes _____ No

- Did this facility file a pollution prevention compliance report with EPA? _____ Yes _____ No

- Did this facility file a Control Compliance Report with EPA? _____ Yes _____ No

- How much perchloroethylene was purchased during each calendar year?

1997 _____

1996 _____

1995 _____

- Does the facility maintain purchasing records for these purchases of perchloroethylene? _____ Yes _____ No

- Who is the facility's current perchloroethylene supplier?

Name:

Phone Number:

- Obtain the following information for each dry cleaning machine: name of manufacturer, model #, serial #, and date installed.

- Does the facility have an O&M manual for each of its dry-cleaning machines? _____ Yes _____ No

- Does the facility maintain leak detection and repair logs? _____ Yes _____ No

- Does the facility have control equipment to control the perchloroethylene (perc) emissions? _____ Yes _____ No

If yes, describe:

TOXIC SUBSTANCES CONTROL ACT (TSCA) - PCB

REGIONAL CONTACT: AQUANETTA DICKENS TELEPHONE: 814-2080

1. Ask/Observe - Does the facility use equipment (i.e., transformers, capacitors, hydraulic/heat transfer systems, etc.) that contains PCBs? ☐ Yes ☐ No

- If yes, does the facility have analysis indicating the concentration of PCBs or is PCB status based on nameplate information?

- Is equipment labelled (yellow labels) ☐ Yes ☐ No

2. Ask/Observe - Does the facility store PCBs on site?

- If yes, describe storage area (including containment provisions) and its location and whether area itself and items stored there are labelled

3. Ask - How long were items in storage?
- _____

4. Observe - Is there any evidence of PCB spills or leaking PCB equipment? ☐ Yes ☐ No

If yes, describe:

5. Ask - If facility uses PCB transformer(s) (PCB >500 ppm), have they been registered with the local fire department?

☐ Yes ☐ No

6. Ask - Does the facility prepare annual documents for its PCBs

☐ Yes ☐ No

7. Ask - Does the facility perform quarterly inspections of its PCB transformers? ☐ Yes ☐ No

TSCA CORE

1. Ask - Does the facility manufacture or import chemicals?
_____ Yes _____ No

If yes, answer the following question:

2. Ask - Are chemical substances used solely for foods, drugs, or pesticide purposes? _____ Yes _____ No

If no, answer the following questions:

3. Ask - What are the names and Chemical Abstract Service Registration Numbers (CASRN) of the chemical substances and what are their end uses, annual production and/or imported volumes (pounds)?
- _____
- _____
- _____

4. Ask - Has the facility ever submitted Inventory Updating Reports (IUR) under TSCA to EPA? _____ Yes _____ No

5. Ask - Does the facility have a working research and development laboratory (i.e., more than a simple QC lab?)
_____ Yes _____ No

6. Ask - Has the facility ever submitted a Pre-Manufacturing Notification (PMN) under TSCA to the EPA? _____ Yes _____ No

If yes, describe:

NOTE:

Attached to this checklist are two copies of a TSCA Notice of Inspection and Receipt for Samples and Documents. These documents must be provided to the facility at the time of the inspection. Give one copy to the facility and retain one copy for EPA records.

WATER

REGIONAL CONTACTS: Lori Reynolds - 814-5435
Karen Johnson - 814-5445

1. Ask/Observe - Does the facility use water in its manufacturing process? Yes No

If yes, does the facility discharge process wastewater, cooling water, stormwater, or any other pollutant into the receiving stream, municipal sewer system or a subsurface disposal system (e.g., septic tank, well, cesspool, drywell, etc.)? _____ Yes _____ No

If yes, describe each discharge and where it goes:

2. **Ask** - Does the facility have a permit for each of these discharges? To streams: NPDES' or Stormwater To POTW: Pre-Treatment To subsurface: Underground Injection Control
- | | |
|-----|----|
| Yes | No |
|-----|----|

3. **Ask/Observe** -- Does the facility treat its wastewater prior to discharging?

If yes, how? (what treatment systems are employed?

4. **Ask/Observe** - Is the effluent from the wastewater treatment facilities clear and free of solids? ☐ Yes ☐ No
5. **Ask/Observe** - Does the equipment appear to be operating properly, clean and well maintained? ☐ Yes ☐ No
6. **Observe** - Are there any unusual odors? ☐ Yes ☐ No
7. **Ask/Observe** - Does the facility have floor drains in its processing or chemical storage areas? ☐ Yes ☒ No

If yes, what materials are likely to be spilled down the floor drains?

If yes, where do the floor drains discharge (treatment facility, municipal sewer, directly to the receiving water or into the septic tank, cesspool, dry well)?

8. **Ask/Observe** - What is the disposal method for the wastewater sludges generated?
-
-

9. **Ask** - Is facility in compliance with discharge limitations?
_____ Yes _____ No

10. **Ask** - Does the facility have a stormwater pollution prevention plan? _____ Yes _____ No

11. **Ask** - Is the drinking water supply private or public? If private, where are the wells located?
-
-

12. **Ask** - Is the drinking water sampled and analyzed for contaminants? _____ Yes _____ No

If yes, are the results reported to the state or EPA?

EMERGENCY PLANNING AND COMMUNITY RIGHT-TO-KNOW ACT (EPCRA) SARA-TITLE III
REGIONAL CONTACT: Aquanetta Dickens/David Wright
TELEPHONE: 814-2080/814-3293

1. Ask - Has the facility had a release of a hazardous substance in excess of reportable Superfund quantities within the last year? ☐ Yes ☐ No

If yes, what was the substance and approximate quantity?

Was EPA/State notified? ☐ Yes ☐ No

Was notification oral or written? _____

2. Ask - Does the facility manufacture, process, or otherwise use any toxic chemicals in a quantity greater than 10,000 lbs. per year? ☐ Yes ☐ No

If yes, identify them and approximate amounts manufactured, processed or used.

3. Ask - Are any of these toxic chemicals identified among those listed as Section 313 chemicals? ☐ Yes ☐ No
- _____
- _____

4. Ask - Has the facility submitted any toxic chemical release forms (Form R) to EPA?
- _____
- _____

5. Ask - Does the facility have a threshold planning quantity of any substance (minimum of 10,000 lbs. of a hazardous substance and/or a minimum of 500 lbs. of an extremely hazardous substance)* that requires submission of a materials safety data sheet (MSDS) to the State Emergency Response Commission (SERC) and/or the Local Emergency Planning Committee (LEPC)? ☐ Yes ☐ No

If yes, has the facility submitted any hazardous chemical inventory forms (Tier II) to the State Emergency Response Commission and/or Local Emergency Planning Committee?

_____ Yes _____ No

6. Ask - Are the MSDS sheets on site? _____ Yes _____ No

* The chemicals subject to these requirements can be found in EPA publication number 560/4-92-011, January 1992, "Title III, List of Lists".

ENVIRONMENTAL ASSESSMENT

1. Is there any evidence of environmental impacts that haven't been addressed? Possible examples include:

- additional evidence of spills, leaks
- vegetation damage in the surrounding area
- odors in the surrounding neighborhood
- neighborhood covered with "dusts"
- poor water quality in streams near the facility
- dead fish or other wildlife noted

2. Were there situations of possible excessive occupational exposures that should be referred to OSHA?

3. Has facility employed any pollution prevention techniques?

_____ Yes _____ No

If yes, describe: _____

4. Is facility located in residential area? _____ Yes _____ No

If yes, does area appear to be economically depressed?

_____ Yes _____ No

What is the approximate distance to the nearest residence?
